



Underground Storage Tank
Community Assistance Program
Application
Part I

July 2005



*State of Washington•P.O. Box 40930•Olympia, WA 98504-0930
(360) 586-5997•1-800-822-3905•Fax (360) 586-7187*

INTRODUCTION

Why is PLIA giving out grants?

In 2005 the state legislature passed a law allowing us to give grants up to \$200,000 to owners of underground petroleum storage tanks located in rural and remote areas of Washington State.

What can you use the grant for?

You can use the grant to:

- ◆ Repair your tanks.
- ◆ Replace your tanks.
- ◆ Cleanup contamination from your tanks (up to \$75,000).

Who is eligible to receive a grant?

You may be eligible if:

- ◆ Your tanks are more than 10 miles away from the nearest service station;
- ◆ Your tanks are located outside of a city, town, or urban area with a population of 10,000 or more;
- ◆ Your tanks are vital to local government, public health, recreational, or safety needs; and,
- ◆ You may face a serious, financial hardship without this grant.

How can I apply?

There are two parts to the grant application. This package is Part I.

- ◆ Read the instructions of Part I carefully.
- ◆ Complete Part I of the application and return the original to us by August 26, 2005.
- ◆ Include **copies** of all other required documents. (Please do not send originals)
- ◆ Review the attached checklist before sending your application.

If you meet the basic requirements in Part I, we will send you Part II. If you do not meet the requirements we will send you a letter explaining why. Part II will ask for detailed financial information to determine if you meet financial eligibility requirements. You will need to include a construction proposal and certification by a local government of vital need.

How will PLIA award the grants?

We will award the grants based on the combined scores of Part I and Part II of the application. The program has \$1 million dollars to spend on grants, so we may give preference to sites that are the only source of petroleum in an area. We hope to start awarding grants in November 2005.

Part I Instructions

Please read this page carefully before filling out the application.

Your application will only be accepted if:

- It is the original.
- It is completed in ink or typed.
- All sections are complete.
- Copies of all required documents are attached.
- It includes the notarized signatures of all legal owners.
- It is received in our office by 5:00 pm on Friday, August 26, 2005.

Incomplete applications will be returned to you, delaying the processing of your application. If necessary, we may ask for additional information from you.

Please:

- **Do not** leave spaces blank.
- Use "N/A" (not applicable) if a question does not relate to you.
- Attach a separate sheet of paper if you need more space to answer a question.
- Send **copies** of supporting documents (e.g. lease agreement, cleanup report, etc.)
- Keep a copy of the application and all documentation for your records.

Section A must be filled out for each owner with a 20% or more interest in the business. The application must have a notarized signature for each owner. ***Spouses are considered legal owners and must also sign unless you can show proof that the business is separate property.***

Applications and any supporting documents may be considered public record under Washington State law (chapter 42.17 RCW).

Please send or deliver completed applications to:

Pollution Liability Insurance Agency
Underground Storage Tank Community Assistance Program
1015 10th Avenue SE
P.O. Box 40930
Olympia, WA 98504-0930

For additional applications or questions please call 1-800-822-3905. Applications are also available on our website at www.plia.wa.gov.

SECTION A: OWNER INFORMATION

A-1.

Owner Name _____

Owner Mailing Address _____

City, State _____

Zip Code _____

Daytime Phone Number _____

Evening Phone Number _____

What is your interest in the business?

☐ Owner of the entire business. Do you lease all or part of the business to someone else? ☐ Yes ☐ No

If yes, how many number of years? _____

(Please attach a copy of agreement or contract)

☐ Owner of the USTs only.

☐ Owner of the real property: Specify building, land, or both _____

☐ Other. Please specify _____

A-2. Please list the following information for each person that currently owns a 20% or more interest in this business. (Please include your spouse unless you have provided documentation that the property is separate.)

Name _____

Address _____

Phone Number _____

Interest in the Business: _____ Month and Year Ownership Began: _____

Name _____

Address _____

Phone Number _____

Interest in the Business: _____ Month and Year Ownership Began: _____

Name _____

Address _____

Phone Number _____

Interest in the Business: _____ Month and Year Ownership Began: _____

A-3. Is any part of the business being held in trust? ☐ Yes ☐ No

Type of Trust

Amount of ownership in trust

Name of Trustee

Name of Beneficiary

SECTION B: BUSINESS INFORMATION

B-1.

Business Name

Contact Name (if different than Owner Name)

Business Address

City, State

Zip Code

Business Phone Number

County

Washington State Tax Registration Number

Days and Hours of Operation

B-2. How long has the business been in operation? ____ Yrs ____ Mos

B-3. Number of employees: _____ Full-time _____ Part-time

B-4. When was the last date of petroleum sold? ____ Yr _____ Total gallons

B-5. Does your business provide, or has it provided, fuel for motor vehicles? ☐ Yes ☐ No

B-6. Insurance Company providing pollution liability coverage _____

Policy Number: _____ Effective dates _____ to _____

Deductible: _____ Coverage Limits: _____

B-7. Please provide the following information for each UST at the site.

Ecology Tag #	Type of Fuel	Capacity (in gallons)	Is the tank active?
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B-8. Has there ever been a cleanup of contamination from a leak, spill, release or discharge of fuel at this site? ☐ Yes ☐ No ☐ Unknown

If yes, who cleaned up the contamination _____ and what year ____?

B-9. Did the cleanup meet the Washington State Department of Ecology's cleanup standards?

☐ Yes (***Please provide a copy of documentation from Ecology***)

☐ No

☐ Unknown

Please explain if you answered no or unknown to the above question. _____

B-10. Do you know of an individual or business that may be liable for any cleanup or environmental contamination at the business site? ☐ Yes ☐ No

Name	Address	Obligation to Site
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SECTION C: GEOGRAPHICAL INFORMATION

C-1. Is the business located in a remote, rural area? ☐ Yes ☐ No

****Remote Rural Area** means the site cannot be located within a city, town, or urban area with a population of 10,000 or more.

If yes, what is the name and distance of the nearest town or city?

Name	Distance (in Miles)
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C-2. Please provide the following information for the nearest petroleum retailer to your business that provides fuel for motor vehicles:

Name	Address
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Distance (in Miles): _____

C-3. Please list ***all*** suppliers that provide fuel to the area that the facility is located:

Name	Address	Phone Number
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Name	Address	Phone Number
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Name	Address	Phone Number
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C-4. Is the business located within 1,000 yards of water? If so, please check all that apply:

Distance from business (in yards)

<input type="checkbox"/> Reservoir	
<input type="checkbox"/> Creek	
<input type="checkbox"/> Lake	
<input type="checkbox"/> Pond	
<input type="checkbox"/> Ocean	
<input type="checkbox"/> Bay	
<input type="checkbox"/> Marsh	
<input type="checkbox"/> Drinking Water Well	
<input type="checkbox"/> Other: Explain _____	

SECTION D: ECONOMIC/FINANCIAL NEED INFORMATION

D-1. Please give the specific names of public agencies below that purchase fuel from your site. The agencies must provide a vital need to your area.

****Vital Local Government, Public Health, Safety, or Recreational Need** means an essential or indispensable service provided for the citizens.

Law Enforcement Agencies:

Local: _____ State: _____ Federal: _____

County: _____ Other: _____

Fire Protection: _____ Hospital/Ambulance Service: _____

Schools: _____ Other: _____

D-2. Which recreational areas benefit from your business?

_____	_____	_____	_____
Name	Address	Name	Address

_____	_____	_____	_____
Name	Address	Name	Address

D-3. Please describe the serious financial hardship that the business would face without financial assistance from our agency.

****Serious Financial Hardship** means the owner(s) does not have cash, cash equivalent or borrowing capacity to bring an underground storage system into compliance with all federal and state underground storage tank regulations and requirements.

Owner's Signature

Date

State of Washington

County of _____

Subscribed and sworn before me this _____ day of _____, 20____.

Notary Public in and for the state of Washington

Residing at _____

My commission expires _____

Owner's Signature

Date

State of Washington

County of _____

Subscribed and sworn before me this _____ day of _____, 20____.

Notary Public in and for the state of Washington

Residing at _____

My commission expires _____

BEFORE YOU SEND US YOUR APPLICATION!!!

Did you:

- ☐ Complete it in ink or type?
- ☐ Fill in **all** blank spaces?
- ☐ Attach copies of any required documents?
- ☐ Read the signature page carefully?
- ☐ Include information and notarized signatures of **all** legal owners?